

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

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Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER	<i>The Estelline Journal</i>		2. DATE <i>9/16/2004</i>
3. FREQUENCY OF ISSUE	3A. NO. OF ISSUES PUBLISHED ANNUALLY	50	3B. ANNUAL SUBSCRIPTION PRICE \$ <i>30 and \$35</i>
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <i>PO Box 159, Estelline, SD 57234</i>			
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <i>PO Box 50, Castlewood, SD 57223</i>			
6. FULL NAME OF PUBLISHER:	<i>Greg and LeeAnne Archer</i>		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)	FULL NAME <i>Greg and LeeAnne Archer</i> COMPLETE MAILING ADDRESS <i>PO Box 50, Castlewood, SD 57223</i>		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) <i>Citizens State Bank</i>			
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE	
A. TOTAL NO. COPIES (Net Press Run)	<i>650</i>	<i>650</i>	
B. PAID AND/OR REQUESTED CIRCULATION			
1. Sales through dealers and carriers, street vendors and counter sales.	<i>100</i>	<i>110</i>	
2. Mail Subscription (Paid and or requested)	<i>401</i>	<i>401</i>	
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	<i>501</i>	<i>511</i>	
D. FREE DISTRIBUTION			
1. BY MAIL, CARRIER OR OTHER MEANS	<i>14</i>	<i>14</i>	
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	<i>0</i>	<i>0</i>	
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	<i>515</i>	<i>525</i>	
F. COPIES NOT DISTRIBUTED			
1. Office use, left over, unaccounted, spoiled after printing	<i>135</i>	<i>125</i>	
2. Return from News Agents	<i>0</i>	<i>0</i>	
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	<i>650</i>	<i>650</i>	

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

LeeAnne Archer
(Signature)

Publisher
(Title)

Sworn to before me this 17th day of Sept, 2004

Janet Kuchler
Notary Public

My commission expires: My Commission Expires January 9, 2005

State of South Dakota

County of Hamlin

(Seal)

